

# REQUEST FOR WITHDRAWAL AS ATTORNEY OR AGENT

Application Number	10/054,914
Confirmation Number	5596
Filing Date	January 25, 2002
First Named Inventor	Thomas S.Y. KO
Art Unit	1615
Examiner Name	James M. Spear
Attorney Docket Number	Q68257

To: Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

I hereby apply to withdraw as attorney or agent for the above identified patent application.

The reasons for this request are:

Client knowingly and freely assents to termination of employment and case has been transferred to another firm.

## CORRESPONDENCE ADDRESS

- ☐ The correspondence address is NOT affected by this withdrawal.
- ☒ Change the correspondence address and direct all future correspondence to:

Pfizer Inc.  
235 East 42<sup>nd</sup> Street  
New York, NY 10017

- ☐ This request is made on behalf of myself and
- ☐ all the attorneys/agents of record,
  - ☐ the attorneys/agents (with registration numbers) listed on the attached paper(s), or
  - ☒ the attorney/agents associated with Customer Number

WASHINGTON OFFICE

**23373**

CUSTOMER NUMBER

This request is enclosed in triplicate (including any attachments).

Name Susan J. Mack

Signature *Susan J. Mack*

Reg. No. 30,951

Date May 18, 2009

*NOTE: Withdrawal is effective when approved rather than when received. Unless there are at least 30 days between approval of withdrawal and the expiration date of a time period for response or possible extension period, the request to withdraw is normally disapproved.*